

County: Lee

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
LEE COUNTY ADULT DAY CENTER INC 2354 SUMTER HWY BISHOPVILLE, SC 29010 HUDSON, PHILLIP E PH#: 803-428-2975 Fac. Cont. Email:NONE	ADC-0083 / 09/30/2009 Lee / Corporation PO BOX 331 CAMDEN, SC 29020 LEE COUNTY ADULT DAY CENTER INC	15
Number of Participants		15

Totals For Facility/License Type Adult Day Care

Number of Activities/Facilities licensed:	1	Number Licensed Units	15
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County: Lee

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
BISHOPVILLE MANOR INC 2779 NORTH HWY 15 BISHOPVILLE, SC 29010 JONES, GENE E PH#: 803-432-1436 Fac. Cont. Email: BISHMANOR@FTC-I.NET	CRC-1108 / 06/30/2009 Lee / Corporation PO BOX 312 BISHOPVILLE, SC 29010 BISHOPVILLE MANOR INC	44

Certifications: Alzheimer Care

COTTONWOOD VILLAS 800 W CHURCH ST BISHOPVILLE, SC 29010 SHEALY, HARRIETT H PH#: 803-484-5303 Fac. Cont. Email: No Fac Cont. email on record	CRC-1186 / 10/31/2009 Lee / Corporation 800 W CHURCH ST BISHOPVILLE, SC 29010 COTTONWOOD VILLAS INC	71
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Certifications: Alzheimer Care

EMERALD RCF I 2244 BROWNTOWN RD BISHOPVILLE, SC 29010 FORTUNE, ELLA R PH#: 803-428-5407 Fac. Cont. Email: TTHLL@DMH.STATE.SC.US	CRC-1205 / 04/30/2010 Lee / State 2244 BROWNTOWN RD BISHOPVILLE, SC 29010 SANTEE-WATEREE COMMUNITY MENTAL HEALTH CENTER	5
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Certifications: None

EMERALD RCF II 2262 BROWNTOWN RD BISHOPVILLE, SC 29010 FORTUNE, ELLA R PH#: 803-428-6044 Fac. Cont. Email: TTHLL@DMH.STATE.SC.US	CRC-1206 / 04/30/2010 Lee / State 2262 BROWNTOWN RD BISHOPVILLE, SC 29010 SANTEE-WATEREE COMMUNITY MENTAL HEALTH CENTER	5
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Certifications: None

Totals For Facility/License Type Community Residential Care Facility

Number of Activities/Facilities licensed:	4	Number Licensed Units	125
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County: Lee

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
MCLEOD I GROUP HOME 808 MCLEOD DR BISHOPVILLE, SC 29010 WOODS, LEROY J PH#: 803-484-6987 Fac. Cont. Email: MMACK@LCDSN.ORG	MR15-0210 / 06/30/2009 Lee / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS	8
MCLEOD II GROUP HOME 814 MCLEOD DR BISHOPVILLE, SC 29010 WOODS, LEROY PH#: 803-484-6995 Fac. Cont. Email: MMACK@LCDSN.ORG	MR15-0211 / 06/30/2009 Lee / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS	8

Totals For Facility/License Type Habilitation R15

Number of Activities/Facilities licensed: 2 Number Licensed Units 16

County: Lee

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
LEE CORRECTIONAL INSTITUTION INFIRMARY	HTL-0873 / 03/31/2010	20
1204 E CHURCH ST	Lee / State	
BISHOPVILLE, SC 29010	1204 E CHURCH ST	
MCDONALD, YVONNE PH#: 803-896-2400	BISHOPVILLE, SC 29010	
Fac. Cont. Email: No Fac Cont. email on record	SC DEPT OF CORRECTIONS	
Licensed Beds: General: 20 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: None

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: 1 Number Licensed Units 20

County: Lee

Facility Type: Nursing Home

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Addres	
Administrator/Phone	Licensee	
MCCOY MEMORIAL NURSING CENTER	NCF-0940 / 12/31/2009	120
207 CHAPPELL DR	Lee / Ltd. Liability	
BISHOPVILLE, SC 29010-0000	207 CHAPPELL DR	
MOORE, JOHN D PH#: 803-484-5636	BISHOPVILLE, SC 29010	
Fac. Cont. Email: JMOORE@COOKE-ASSOCIATES.COM	COOKE ASSOCIATES OF BISHOPVILLE L L C	
Licensed Beds Nursing Home 120	Institutional Nursing Home 0	
Certifications:None		

Totals For Facility/License Type Nursing Home

Number of Activities/Facilities licensed:	1	Number Licensed Units	120
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County: Lee

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
FRESENIUS MEDICAL CARE OF LEE COUNTY	ERD-0175 / 05/31/2009	21
289 FAIRVIEW AVE #B	Lee / Corporation	
BISHOPVILLE, SC 29010-1513	C/O SUMTER DIALYSIS CENTER, 615 W WESMARK BLVD	
ROGERS, MARIE PH#: 803-484-5972	SUMTER, SC 29150-1900	
Fac. Cont. Email: No Fac Cont. email on record	BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC	

Licensed Stations: Hemodialysis: 21 Peritoneal: 0

Totals For Facility/License Type Renal Dialysis

Number of Activities/Facilities licensed: Number Licensed Units

Number of Activities/Facilities licensed in county of Lee	# Lics	10
Number Licensed Units :	317	

Report Total

Total Number of Activities/Facilities licensed	10	Total Number Licensed Units	317
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